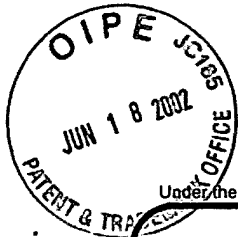


6-20-02

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Please type a plus sign (+) inside this box → ☐

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PTO/SB/21 (08-00)

Approved for use through 10/31/2002. OMB 0651-0031

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

| | |
|------------------------|-----------------------|
| Application Number | 09/496,391 |
| Filing Date | February 2, 2000 |
| First Named Inventor | San Antonio, James D. |
| Group Art Unit | 1642 |
| Examiner Name | Harris, A. |
| Attorney Docket Number | SAN01-NP001 |

Total Number of Pages in This Submission 10

ENCLOSURES (check all that apply)

| | | |
|--|--|--|
| <input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input checked="" type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): |
| Remarks | | |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | |
|-------------------------|---------------------------|
| Firm or Individual name | Kristie A. Deyerle |
| Signature | <i>Kristie A. Deyerle</i> |
| Date | June 18, 2002 |

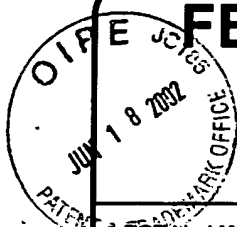
CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, DC 20231 on this date:

| | | | |
|-----------------------|--|------|--|
| Typed or printed name | | | |
| Signature | | Date | |

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FEE TRANSMITTAL for FY 2002

Patent fees are subject to annual revision.

Complete if Known

| | |
|----------------------|-----------------------|
| Application Number | 09/496,391 |
| Filing Date | 02/02/2000 |
| First Named Inventor | San Antonio, James D. |
| Examiner Name | Harris, A. |
| Group Art Unit | 1642 |
| Attorney Docket No. | SAN01-NP001 |

| | | |
|-------------------------|------|--------|
| TOTAL AMOUNT OF PAYMENT | (\$) | 980.00 |
|-------------------------|------|--------|

METHOD OF PAYMENT

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

| | |
|------------------------|-----------------------------|
| Deposit Account Number | 50-0491 |
| Deposit Account Name | Thomas Jefferson University |

- ☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17
- ☒ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ Payment Enclosed:

☐ Check ☐ Credit card ☐ Money Order ☐ Other

FEE CALCULATION**1. BASIC FILING FEE**

| Large Entity | Small Entity | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|--------------|--------------|----------|----------|------------------------|----------|
| 101 | 740 | 201 | 370 | Utility filing fee | |
| 106 | 330 | 206 | 165 | Design filing fee | |
| 107 | 510 | 207 | 255 | Plant filing fee | |
| 108 | 740 | 208 | 370 | Reissue filing fee | |
| 109 | 160 | 214 | 80 | Provisional filing fee | |

SUBTOTAL (1) (\$)

0.00

2. EXTRA CLAIM FEES

| Fee Code | Fee (\$) | Fee Description | Fee Paid |
|----------|----------|-----------------|----------|
| 20** | | Extra Claims | |
| 3** | | Extra Claims | |

| Large Entity | Small Entity | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|--------------|--------------|----------|----------|--|----------|
| 103 | 18 | 203 | 9 | Claims in excess of 20 | |
| 102 | 84 | 202 | 42 | Independent claims in excess of 3 | |
| 104 | 280 | 204 | 140 | Multiple dependent claim, if not paid | |
| 105 | 84 | 205 | 42 | ** Reissue independent claims over original patent | |
| 110 | 18 | 210 | 9 | ** Reissue claims in excess of 20 and over original patent | |

SUBTOTAL (2) (\$)

0.00

**or number previously paid, if greater; For Reissues, see above

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

| Large Entity | Small Entity | Fee Code | Fee (\$) | Fee Description | Fee Paid |
|--------------|--------------|----------|----------|--|----------|
| 105 | 130 | 205 | 65 | Surcharge - late filing fee or oath | |
| 127 | 50 | 227 | 25 | Surcharge - late provisional filing fee or cover sheet | |
| 139 | 130 | 139 | 130 | Non-English specification | |
| 147 | 2,520 | 147 | 2,520 | For filing a request for <i>ex parte</i> reexamination | |
| 112 | 920* | 112 | 920* | Requesting publication of SIR prior to Examiner action | |
| 113 | 1,840* | 113 | 1,840* | Requesting publication of SIR after Examiner action | |
| 115 | 110 | 215 | 55 | Extension for reply within first month | |
| 116 | 400 | 216 | 200 | Extension for reply within second month | |
| 117 | 920 | 217 | 460 | Extension for reply within third month | |
| 118 | 1,440 | 218 | 720 | Extension for reply within fourth month | |
| 128 | 1,960 | 228 | 980 | Extension for reply within fifth month | 980.00 |
| 119 | 320 | 219 | 160 | Notice of Appeal | |
| 120 | 320 | 220 | 160 | Filing a brief in support of an appeal | |
| 121 | 280 | 221 | 140 | Request for oral hearing | |
| 138 | 1,510 | 138 | 1,510 | Petition to institute a public use proceeding | |
| 140 | 110 | 240 | 55 | Petition to revive - unavoidable | |
| 141 | 1,280 | 241 | 640 | Petition to revive - unintentional | |
| 142 | 1,280 | 242 | 640 | Utility issue fee (or reissue) | |
| 143 | 460 | 243 | 230 | Design issue fee | |
| 144 | 620 | 244 | 310 | Plant issue fee | |
| 122 | 130 | 122 | 130 | Petitions to the Commissioner | |
| 123 | 50 | 123 | 50 | Processing fee under 37 CFR 1.17(q) | |
| 126 | 180 | 126 | 180 | Submission of Information Disclosure Stmt | |
| 581 | 40 | 581 | 40 | Recording each patent assignment per property (times number of properties) | |
| 146 | 740 | 246 | 370 | Filing a submission after final rejection (37 CFR § 1.129(a)) | |
| 149 | 740 | 249 | 370 | For each additional invention to be examined (37 CFR § 1.129(b)) | |
| 179 | 740 | 279 | 370 | Request for Continued Examination (RCE) | |
| 169 | 900 | 169 | 900 | Request for expedited examination of a design application | |

Other fee (specify) _____

*Reduced by Basic Filing Fee Paid

SUBTOTAL (3) (\$)

980.00

SUBMITTED BY

| | | | | | |
|-------------------|---------------------------|-----------------------------------|------------|-----------|----------------|
| Name (Print/Type) | Kristie A. Deyerle | Registration No. (Attorney/Agent) | 51,070 | Telephone | (215) 503-0116 |
| Signature | <i>Kristie A. Deyerle</i> | Date | 06/18/2002 | | |

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

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CERTIFICATE OF MAILING UNDER 37 C.F.R. 1.10

EXPRESS MAIL Mailing Label Number: **EV067913163US**

Date of Deposit: June 18, 2002

I hereby certify that this paper and/or fee is being deposited with the United States Postal Service, "**EXPRESS MAIL - POST OFFICE TO ADDRESSEE**" service under 37 C.F.R. 1.10, on the date indicated above, and is addressed to Box Responses - Fee, Commissioner of Patents & Trademarks, Washington, D.C., 20231.

Kristie A. Deyerle

(Type or print name of person mailing paper.)

A handwritten signature in dark ink, appearing to read "Kristie A. Deyerle", written over a horizontal line.

(Signature of person mailing paper)